Medical Corps Update

CAPT Christopher Culp, MC, USN

Deputy Chief
United States Navy Medical Corps

12 JAN 2009

Chief of the Corps

- RDML William Roberts
- OPNAV N931 (Head’s SG’s offices at Pentagon)

“This has been a challenging year, marked by end strength reductions, recruiting difficulties, financial constraints and increasingly onerous regulation, particularly of our GME programs…”

“This has been a challenging year, marked by end strength reductions, recruiting difficulties, financial constraints and increasingly onerous regulation, particularly of our GME programs…”

Medical Corps Update, fall 1996

NAVY MEDICINE
World Class Care…Anytime, Anywhere

Status of Personnel and Manning

NAVY MEDICINE
World Class Care…Anytime, Anywhere

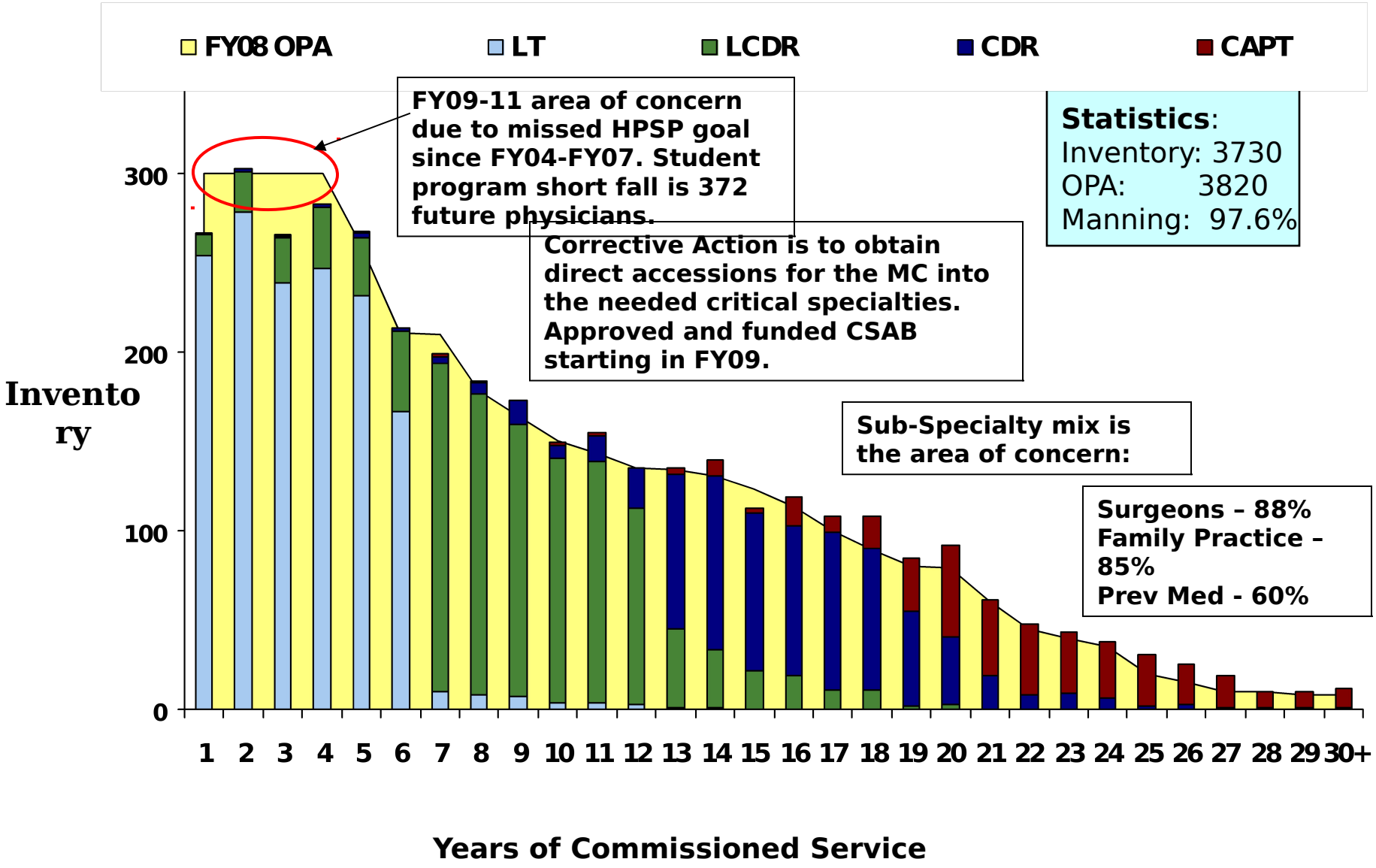
Medical Corps Stats

(as of Sep 2008)

- Total Officers as of Sep 2008 = 3751
  - Staff - 2657
  - Training - 1073
- Funded Billets - 3820
  - Staff - 2742
  - Training -1078
- Percent Manned – 97.6%
- GS/Contracts – 190/360 (13% of force)

NAVY MEDICINE
World Class Care…Anytime, Anywhere

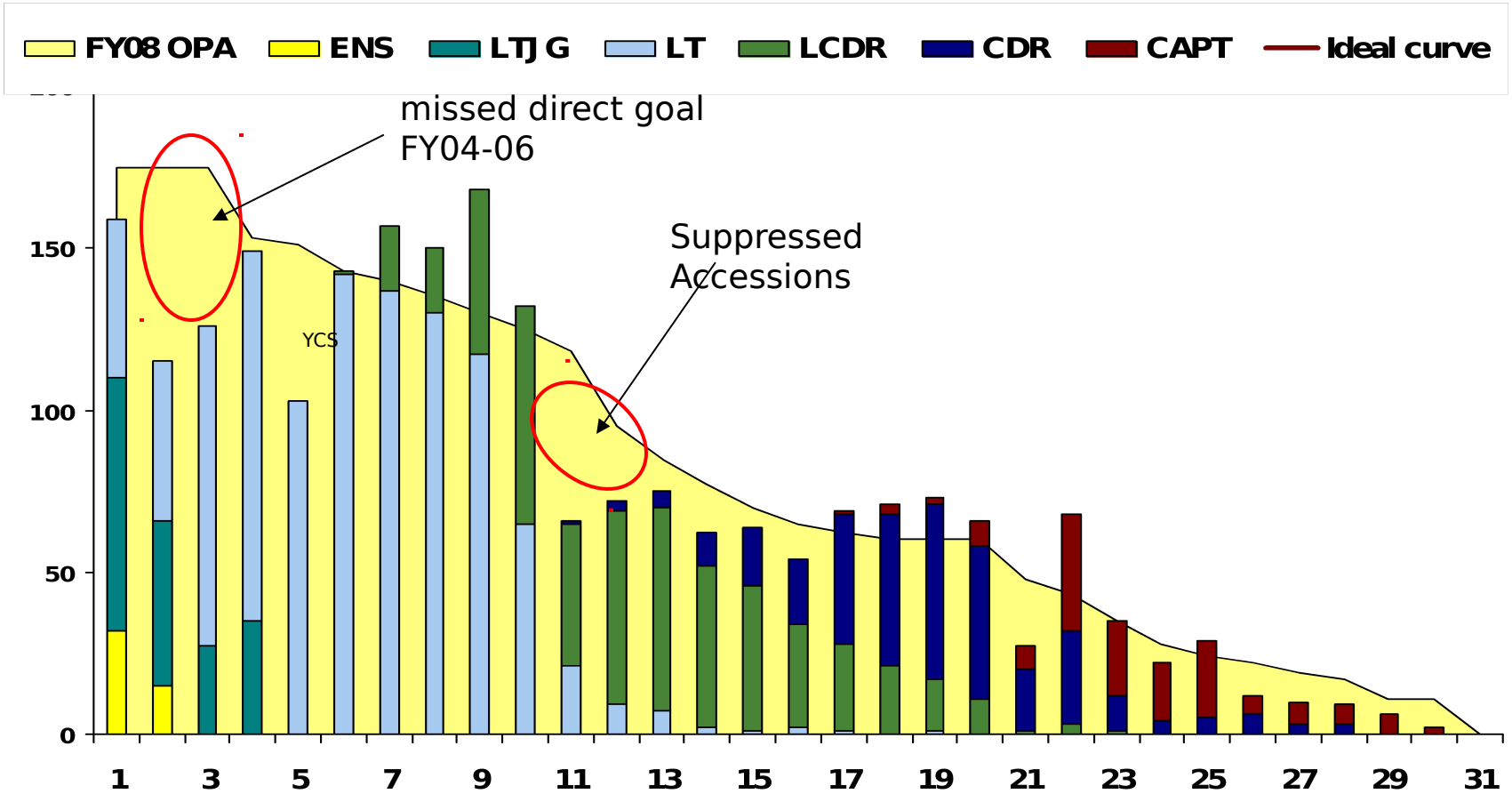
Medical Corps Community


FY08 OPA
LT
LCDR
CDR
CAPT
FY09-11 area of concern due to missed HPSP goal since FY04-FY07. Student program short fall is 372 future physicians.
Corrective Action is to obtain direct accessions for the MC into the needed critical specialties. Approved and funded CSAB starting in FY09.
Statistics:
Inventory: 3730
OPA: 3820
Manning: 97.6%
Sub-Specialty mix is the area of concern:
Surgeons – 88%
Family Practice – 85%
Prev Med - 60%
Inventory
0
100
200
300
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30+
Years of Commissioned Service

Source: OMF data as of end September 2007; Reallocated OPA as of March

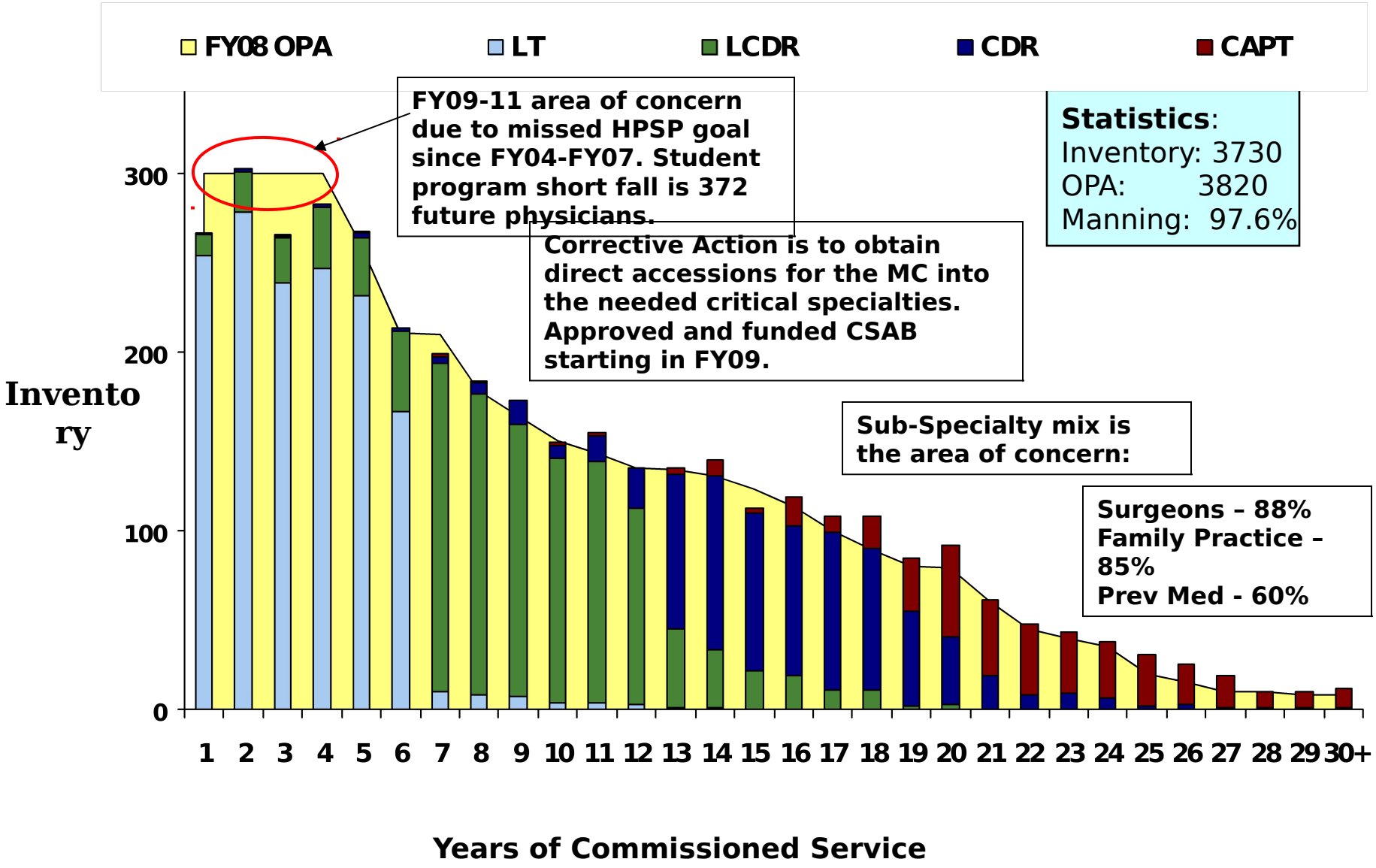
NAVY MEDICINE
World Class Care…Anytime, Anywhere

Medical Service Corps



NAVY MEDICINE
World Class Care…Anytime, Anywhere

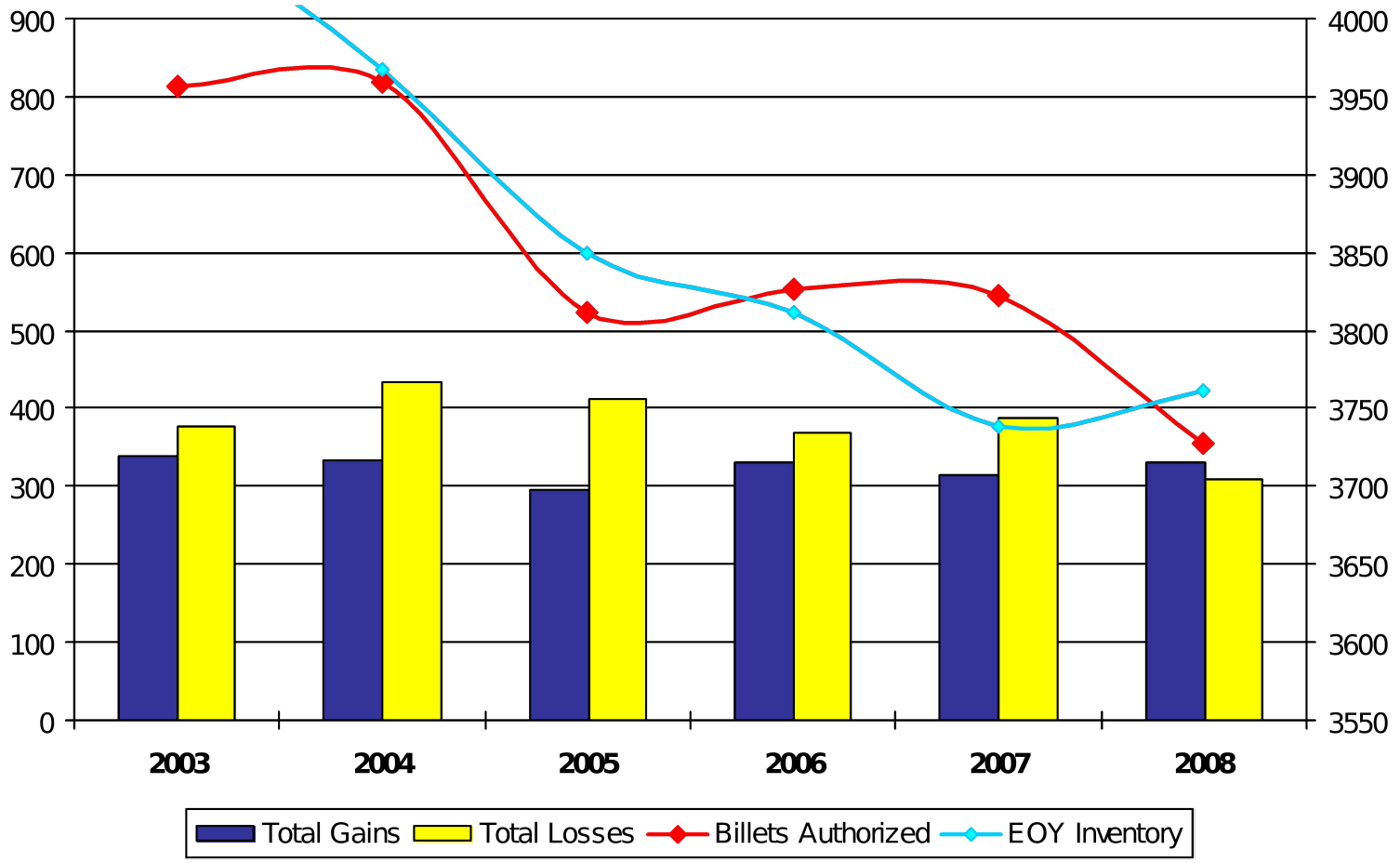
Medical Corps Community


FY08 OPA
LT
LCDR
CDR
CAPT
FY09-11 area of concern due to missed HPSP goal since FY04-FY07. Student program short fall is 372 future physicians.
Corrective Action is to obtain direct accessions for the MC into the needed critical specialties. Approved and funded CSAB starting in FY09.
Statistics:
Inventory: 3730
OPA: 3820
Manning: 97.6%
Sub-Specialty mix is the area of concern:
Surgeons – 88%
Family Practice – 85%
Prev Med - 60%
Inventory
0
100
200
300
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30+
Years of Commissioned Service

Source: OMF data as of end September 2007; Reallocated OPA as of March

NAVY MEDICINE
World Class Care…Anytime, Anywhere

Medical Corps Force Structure *FY03 - FY08*



Actual Inventory Source - BUMIS, PERS
Billet Source - TFMMS extract 30 SEP of Applicable Year.

New FY09 MC Special Pay Rates

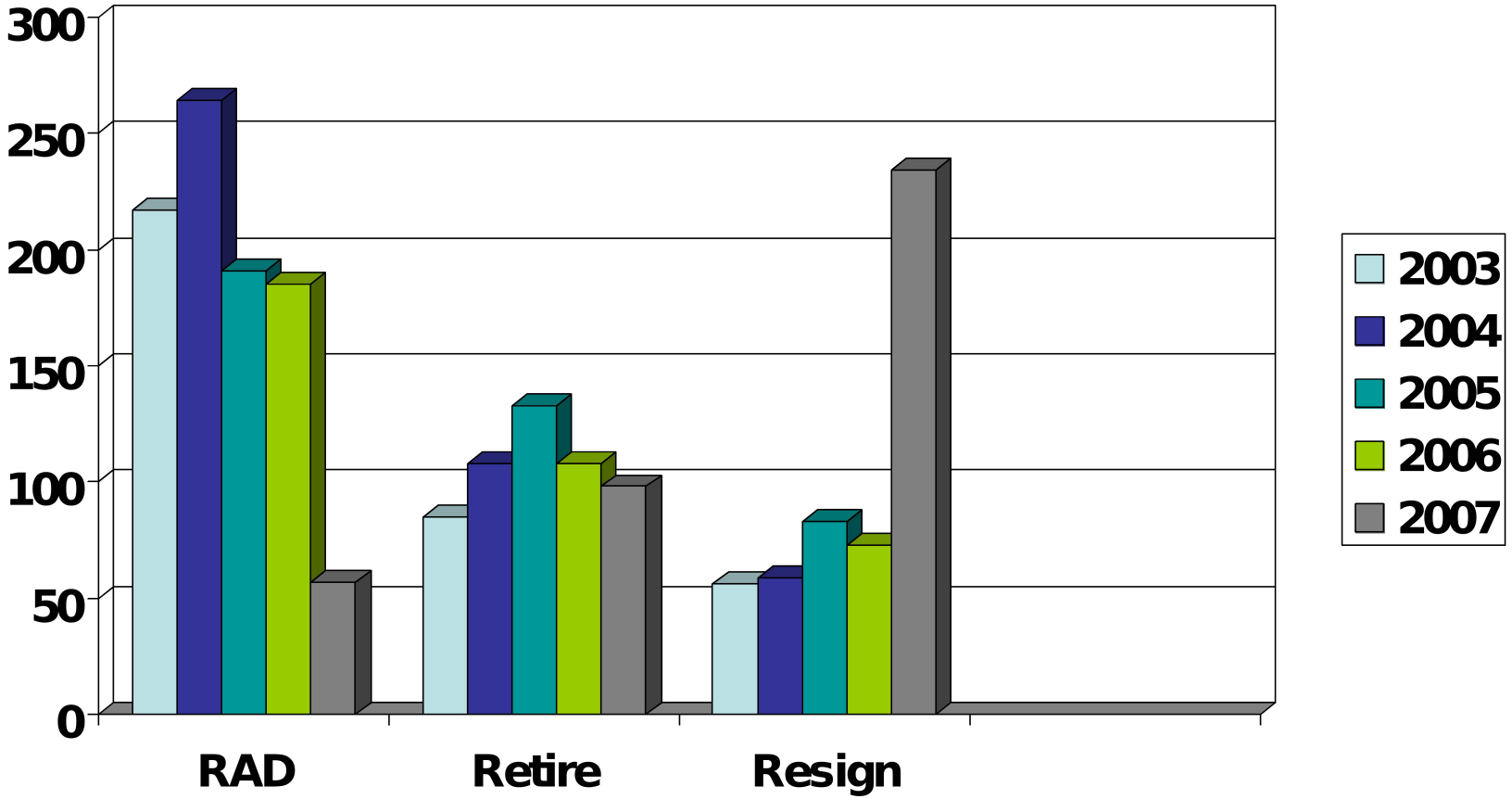
FY08 - FY09 Physician Pay Plan Summary		FY 08 ISP one-year rate	FY 08 MISP multi-year rate	FY 08 MSP 2 Year	FY 08 MSP 3 Year	FY 08 MSP 4 Year		FY 09 ISP one-year rate	FY 09 MISP multi-year rate	FY 09 MSP 2 Year	FY 09 MSP 3 Year	FY 09 MSP 4 Year
~~Specialty~~		Annual, Not MSP eligible, or Mobilized RC	if taking MSP	Rate	Rate	Rate		Annual, Not MSP eligible, or Mobilized RC	if taking MSP	33% or current higher 2-Year Rate	66% Rate or current higher 3-Year Rate	Proposed Rate
AEROSPACE MED (61N)		13	13	12	13	17		**20**	**20**	12	13	**20**
ANESTHESIOLOGY	A	36	**50**	25	38	50	R	36	50	25	40	**60**
CARDIOLOGY - ADULT	P	36	41	21	31	41	O	36	41	21	34	**51**
CARDIOLOGY - ADULT, AIR FORCE	P	36	41	21	31	41	P	36	41	21	40	**60**
DERMATOLOGY	R	18	18	**17**	**25**	**33**	O	**20**	**20**	17	25	**38**
EMERGENCY MED	O	26	26	17	25	33	S	26	**30**	17	26	**40**
FAMILY PRACTICE	V	13	13	17	25	33	E	**20**	**20**	17	25	**38**
GASTROENTEROLOGY	E	26	29	**22**	**33**	**44**	D	**26**	29	22	33	**50**
GEN INTERNAL MED	D	14	14	13	19	25		**20**	**20**	13	23	**35**
GENERAL SURGERY		29	34	**25**	**38**	**50**		29	**50**	25	40	**60**
NEUROLOGY		14	14	13	19	25	F	**20**	20	13	19	**25**
NEUROSURGERY	F	36	50	25	38	50	Y	36	**60**	25	40	**60**
OB/GYN	Y	31	31	17	25	33	0	31	31	17	25	**35**
OPHTHALMOLOGY	0	28	28	13	19	25	9	28	**30**	13	19	**25**
ORTHOPEDICS		36	41	17	25	33		36	**50**	17	33	**50**
OTOLARYNGOLOGY	8	30	33	17	25	33		30	**35**	17	25	**33**
PATHOLOGY		16	19	13	19	25	R	**20**	**20**	13	20	**30**
PEDIATRICS	A	13	13	13	19	25	T	**20**	**20**	13	20	**30**
PHYS MED	T	13	13	12	13	17	E	**20**	**20**	12	13	**20**
PREV / OCC MED	E	13	13	13	19	25	S	**20**	**20**	13	20	**30**
PSYCHIATRY	S	15	15	**17**	**25**	**33**		**20**	**20**	17	28	**43**
PULMONARY MED / IM-Critical Care		23	26	21	31	41		23	26	21	31	**45**
PULMONARY MED (AIR FORCE)		23	26	21	31	41		23	26	21	36	**55**
RADIOLOGY -DX / TX		36	42	25	38	50		36	42	25	40	**60**
UROLOGY		28	28	**20**	**30**	**40**		28	28	20	30	**45**
SUBSPEC CAT I (note 1)-Surg/Orth Fel		**36**	**41**	**23**	**34**	**45**		36	**57**	23	36	**55**
SUBSPEC CAT II (note 2)-Nuc		28	28	12	13	17		28	28	12	18	**27**
SUBSPEC CAT III (note 3)-Sub		23	26	12	13	17		23	**26**	12	17	**25**
SUBSPEC CAT IV (note 4)-Sub		14	14	13	19	25		**20**	**20**	13	19	**25**
SUBSPEC CAT V (note 5)-Fell		**36**	**41**	**21**	**31**	**41**		**36**	41	21	31	**45**
		FY08 CHANGES IN YELLOW							**CAT III - ADD ALLERGY/ IMMUNOLOGY**			
									CAT V- ADD OPHTHALMOLOGY FELLOWS			

Internist Pay

Rank / Yrs	LCDR (6)	CDR (12)	CAPT (18)
Base pay	$63,948	$78,852	$100,668
BAS+BAH	31,920	33,912	34,140
VSP+BCP	15,996	19,992	14,004
ASP	15,000	15,000	15,000
ISP	20,000	20,000	20,000
MSP(4)	0	35,000	35,000
Navy total	$143,864	$202,756	$218,812
MGMA	$144,000	$ 174,000	$248,000

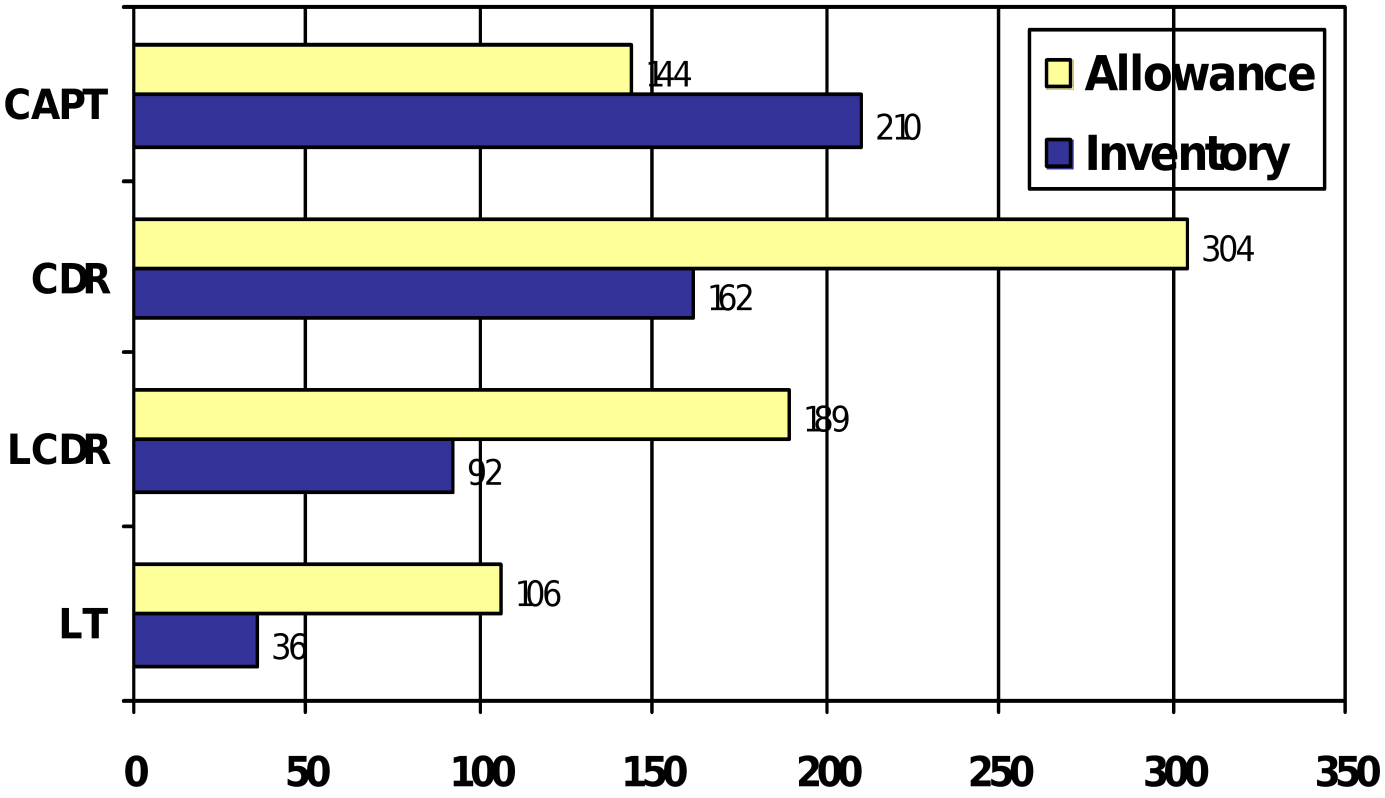
NAVY MEDICINE
World Class Care…Anytime, Anywhere

Exit Pathways--MC
Shift Away from Reserves



NAVY MEDICINE
World Class Care…Anytime, Anywhere

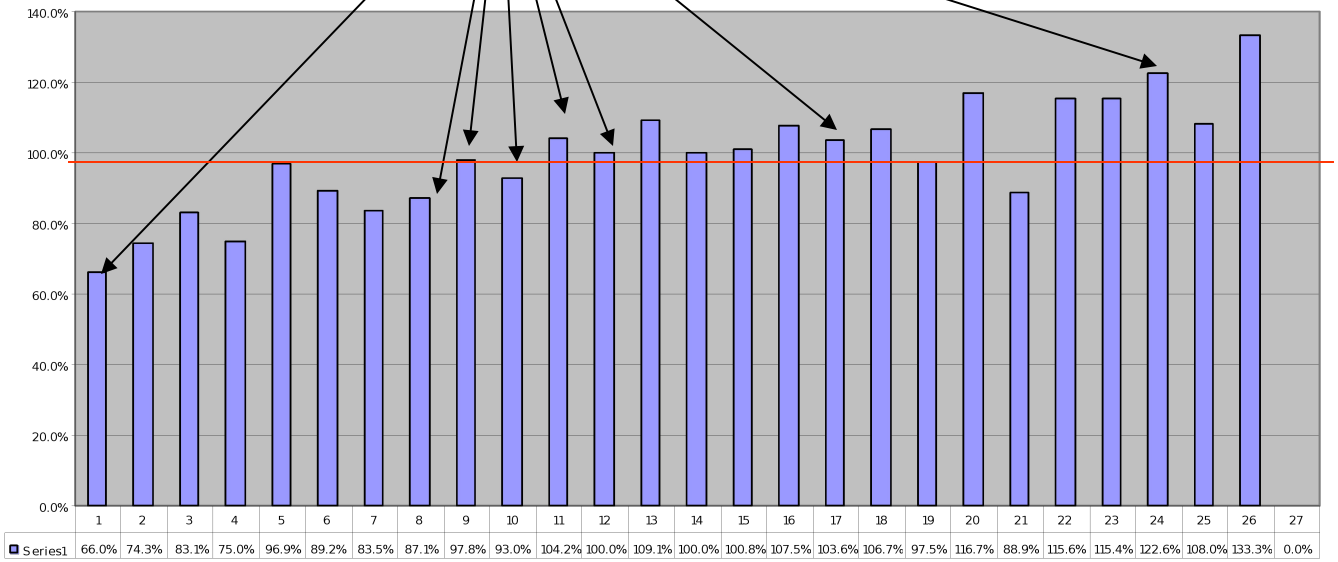
Reserve Medical Corps (Sep 2007)



NAVY MEDICINE
World Class Care…Anytime, Anywhere

Manning by Specialty
September 2008

Heavily Tasked for OIF/OEF



	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27
Series1	66.0%	74.3%	83.1%	75.0%	96.9%	89.2%	83.5%	87.1%	97.8%	93.0%	104.2%	100.0%	109.1%	100.0%	100.8%	107.5%	103.6%	106.7%	97.5%	116.7%	88.9%	115.6%	115.4%	122.6%	108.0%	133.3%	0.0%

1. Prev Med
2. UMO
3. RAM
4. Derm
5. Urology
6. G Surg
7. Radiology
8. FM
9. Anesth
10. Psych
11. ER
12. Ortho
13 OB/GYN
14. Nuc Med
15. FS
16. Pathology
17. IM
18. Neurosurg
19. Occ Med
20. ENT
21. Rad Onc
22. Ophthalmol
23. Peds
24. GMO
25. Neurology
26. PM&R

NAVY MEDICINE
World Class Care…Anytime, Anywhere

Critically Undermanned Specialties by Corps "Endangered Species List"

Medical Corps	Dental Corps
• Preventive Medicine – 60% • Dermatology – 73% • UMO – 74% • RAM – 83% • Dx Radiology – 84% • Family Practice – 85% • Surgery – 88%	• General – 76% • Prosthodontics – 83% • Oral Surgery – 94%
Medical Service Corps	**Nurse Corps**
• Clinical Psychology – 79% • Physician Asst.– 86%	• Critical Care – 57% • FNP – 82% • Nurse Anesthetist – 90%

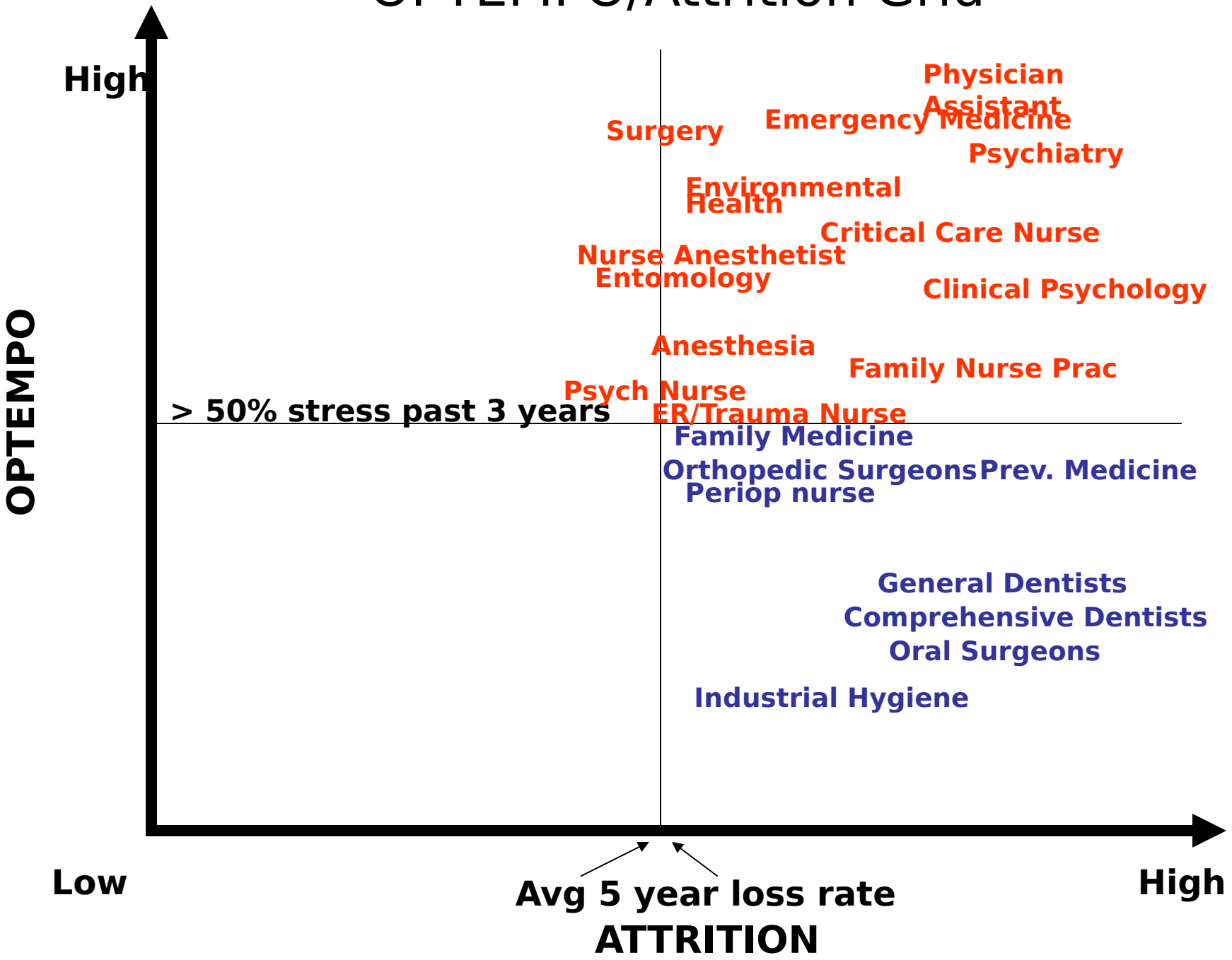
Medical Department Officer Communities High Demand (AC)

Deployed over 50% of Inventory 2004 - 2006

Specialty	Shore Inventory	Actual Deployments	Stress Percent
Physician Assistant	154	136	88%
Emergency Medicine	73	62	85%
Environmental Health	57	47	82%
General Surgery	123	98	80%
Psychiatry	73	53	73%
Critical Care Nurse	127	89	70%
Nurse Anesthetist	91	6	69%
Entomology	25	17	68%
Clinical Psychology	65	43	66%
Anesthesia	101	55	54%
Family Nurse Practitioner	39	21	54%
Psych Nurse	51	27	53%
ER/Trauma Nurse	125	65	52%

•Shore inventory does not include organic assets deployed in support of USMC and Fleet operations or those in training

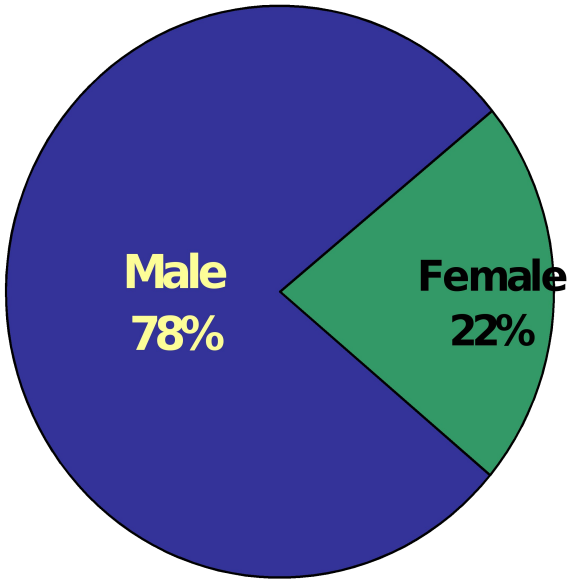
OPTEMPO/Attrition Grid

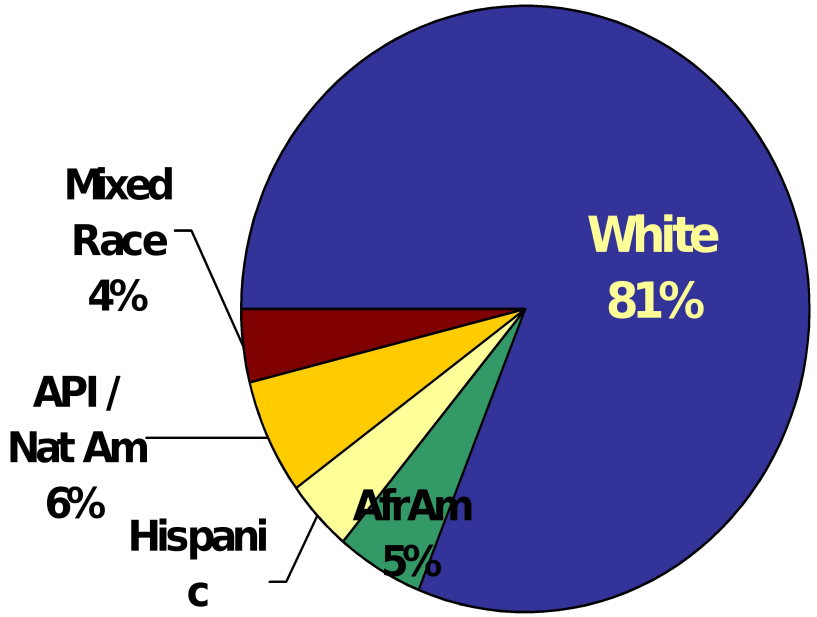


NAVY MEDICINE
World Class Care…Anytime, Anywhere

Diversity Sep 2008

In the 2006 US 1st-year medical school class of 17000, 6% (1100) were URM



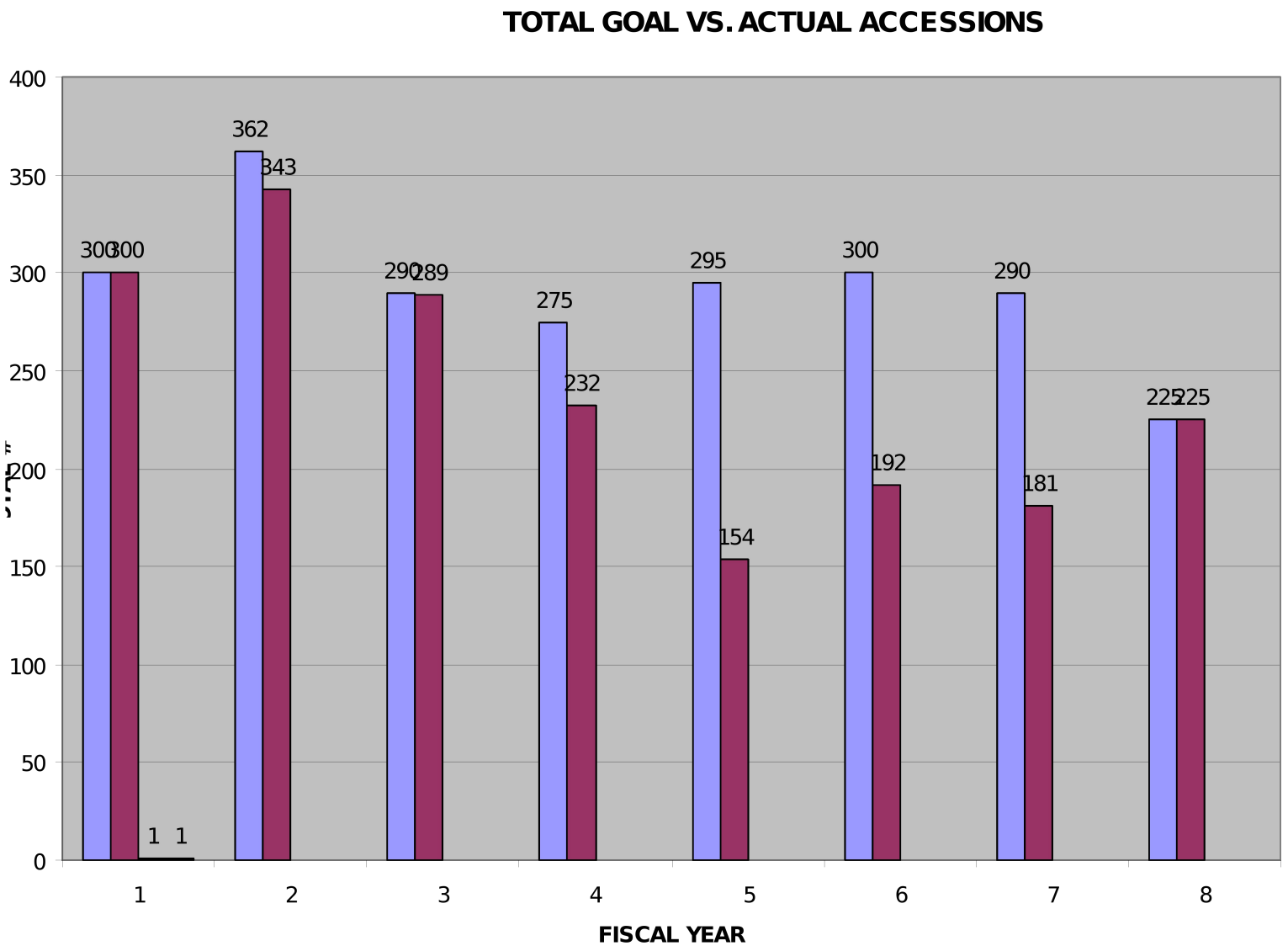


NAVY MEDICINE
World Class Care…Anytime, Anywhere

Status of HPSP

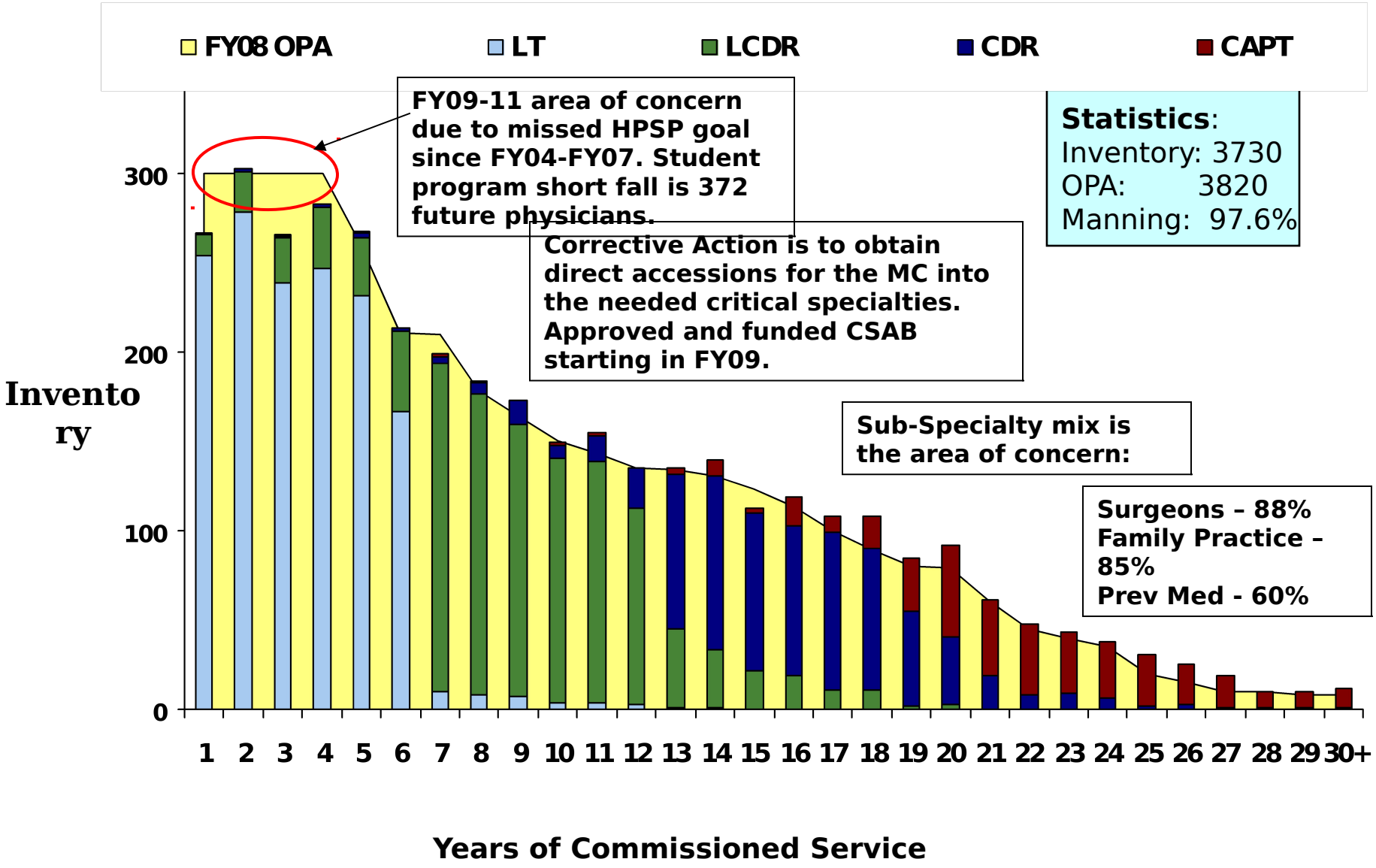
NAVY MEDICINE
World Class Care…Anytime, Anywhere

Medical Corps HPSP Statistics Goal VS Actual



NAVY MEDICINE
World Class Care…Anytime, Anywhere

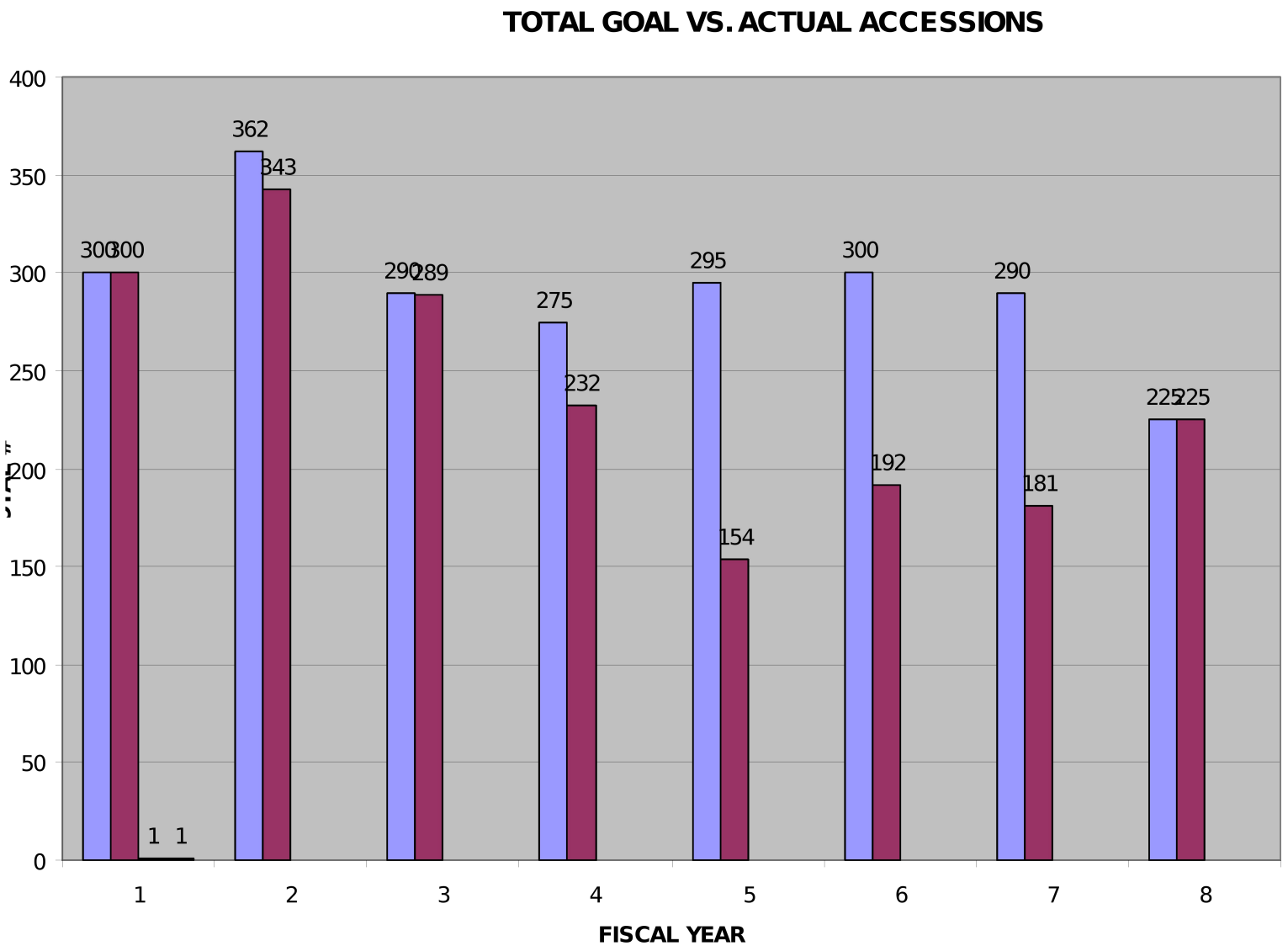
Medical Corps Community


FY08 OPA
LT
LCDR
CDR
CAPT
FY09-11 area of concern due to missed HPSP goal since FY04-FY07. Student program short fall is 372 future physicians.
Corrective Action is to obtain direct accessions for the MC into the needed critical specialties. Approved and funded CSAB starting in FY09.
Statistics:
Inventory: 3730
OPA: 3820
Manning: 97.6%
Sub-Specialty mix is the area of concern:
Surgeons – 88%
Family Practice – 85%
Prev Med - 60%
Inventory
0
100
200
300
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30+
Years of Commissioned Service

Source: OMF data as of end September 2007; Reallocated OPA as of March

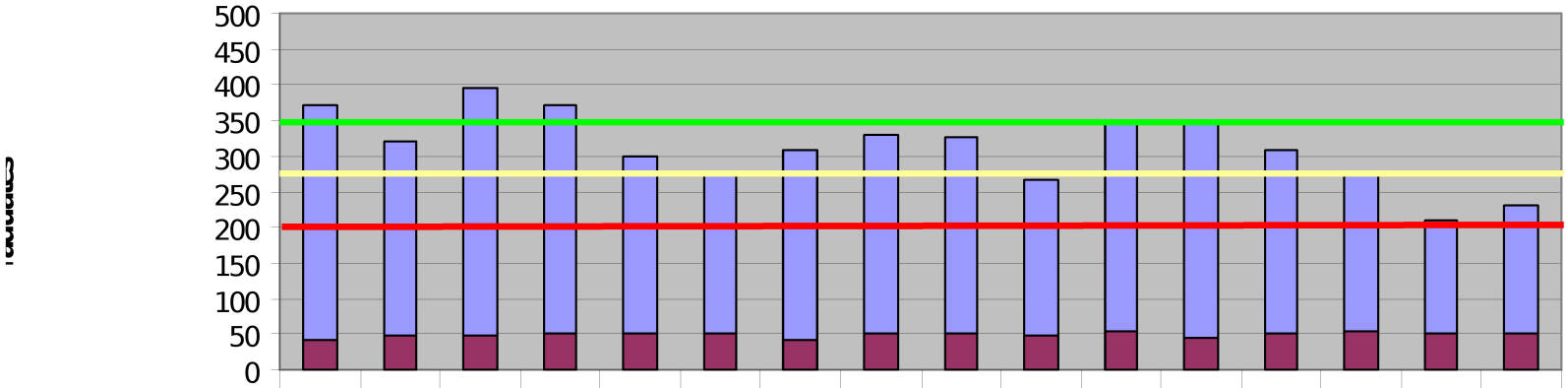
NAVY MEDICINE
World Class Care…Anytime, Anywhere

Medical Corps HPSP Statistics Goal VS Actual



NAVY MEDICINE
World Class Care…Anytime, Anywhere

Navy - Sponsored Medical School Graduates with Numbers Needed to Meet Manning Requirements



	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007*	2008*	2009*	2010*
HPSP Grads	329	272	349	320	250	228	264	277	275	220	293	297	259	222	157	179
USUHS Grads	41	49	47	50	50	51	43	52	50	47	53	46	50	54	52	52

* Status as of 9/14/06

Graduation Year

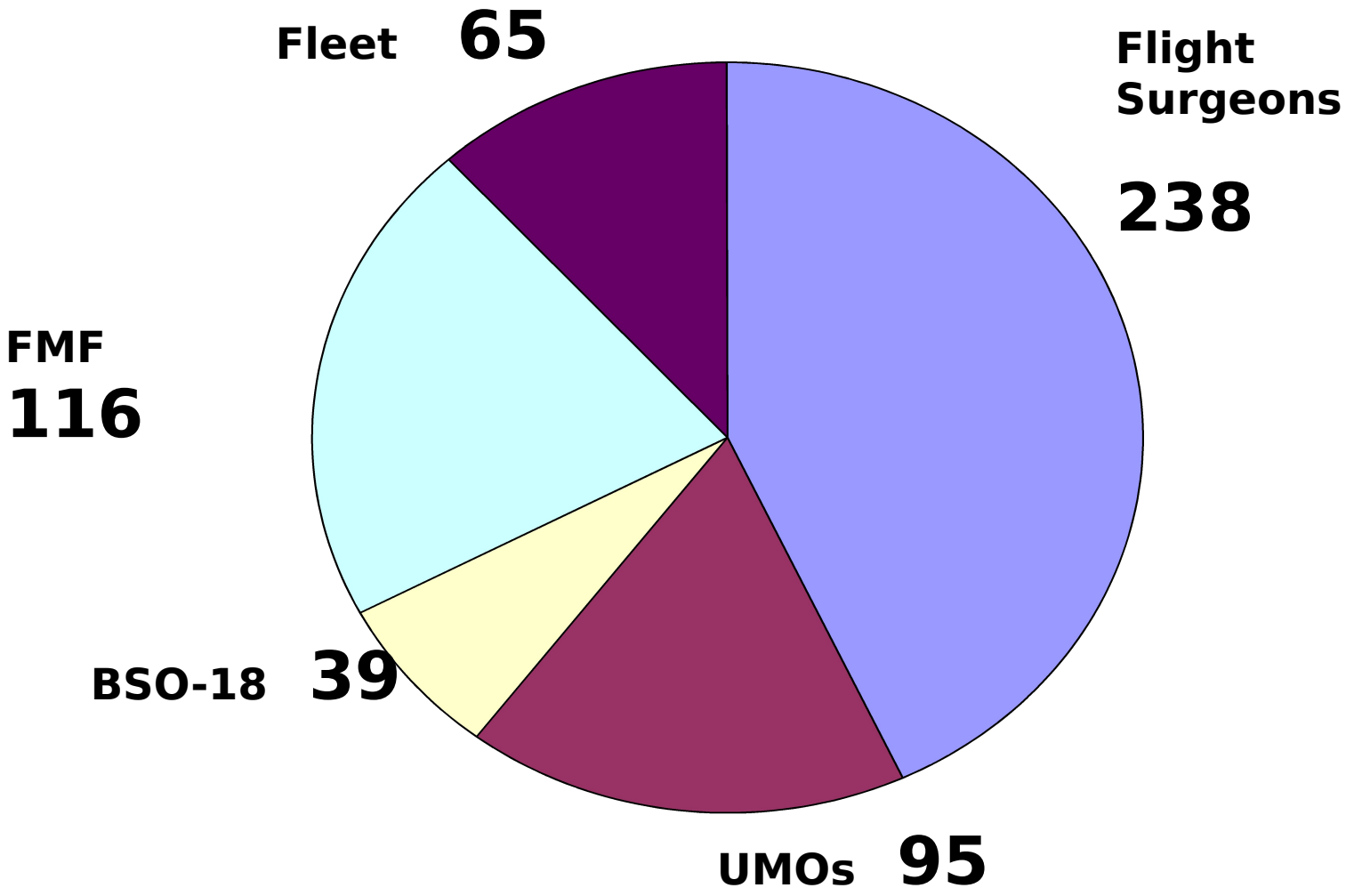
- Minimum number of graduates needed to meet annual operational medical officer (GMO+FS+UMO) requirements
- Minimum number of graduates needed to meet annual operational requirements + meet inservice GME-2 program selection goals
- Minimum number of graduates needed to meet operational requirements + meet inservice GME-2 program selection goals + defer appropriate number of graduates to train in critical shortage specialties

NAVY MEDICINE
World Class Care…Anytime, Anywhere

Status of the GMO

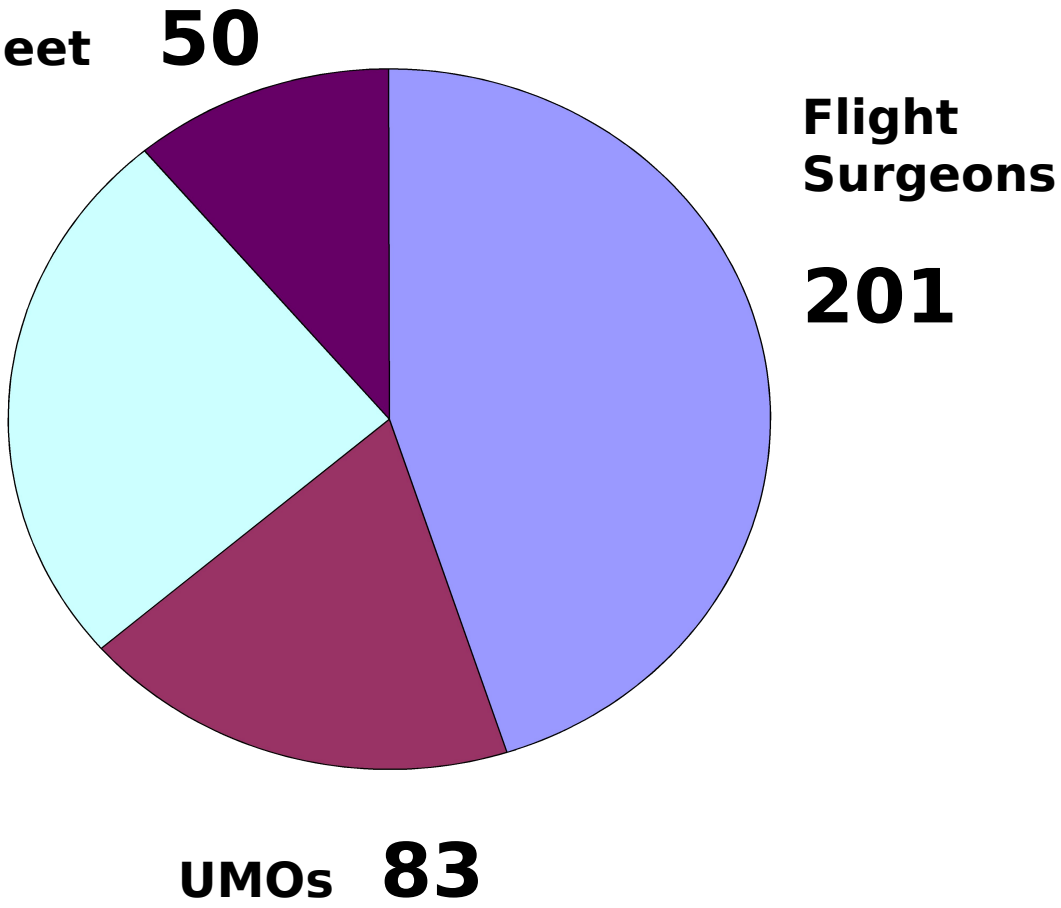
NAVY MEDICINE
World Class Care…Anytime, Anywhere

2006 GMO Billets
Total = 553



NAVY MEDICINE
World Class Care…Anytime, Anywhere

2007 GMO Billets
Total = 447



BSO-18
All PGY-1 billets converted 2007

NAVY MEDICINE
World Class Care…Anytime, Anywhere

2006 billet conversions

- 28 to MSC/NC
- 1 to EM
- 77 to PCMO
  - "Fair Share" to
    - Pediatrics
    - Family Medicine
    - Internal Medicine
  - Individuals with PCMO privileges
- 447 remaining GMO

Internship—State Licensure

- 19 States now require 2 or more years of post-graduate medical education for licensure
  - 17 require 2 years post-med school training
    - AK, CT, DC, IL, KY, ME, MI, MN, MT, NH, NM, PA, RI, SD, TN, UT, WA
  - 2 require 3 years post-med school training
    - NV, NJ
- Up from 13 states in 2007, 8 in 2006

NAVY MEDICINE
World Class Care…Anytime, Anywhere

Career Path

romotion to Control Grades

(Historical)

		FY 08	FY 09	FY 10
	Opportunity Selects	80% 70	80% 64	Proposed 80% 63
	Opportunity Selects	80% 106	80% 156	80% 146
	Opportunity Selects	100% 274	100% 246	100% 203

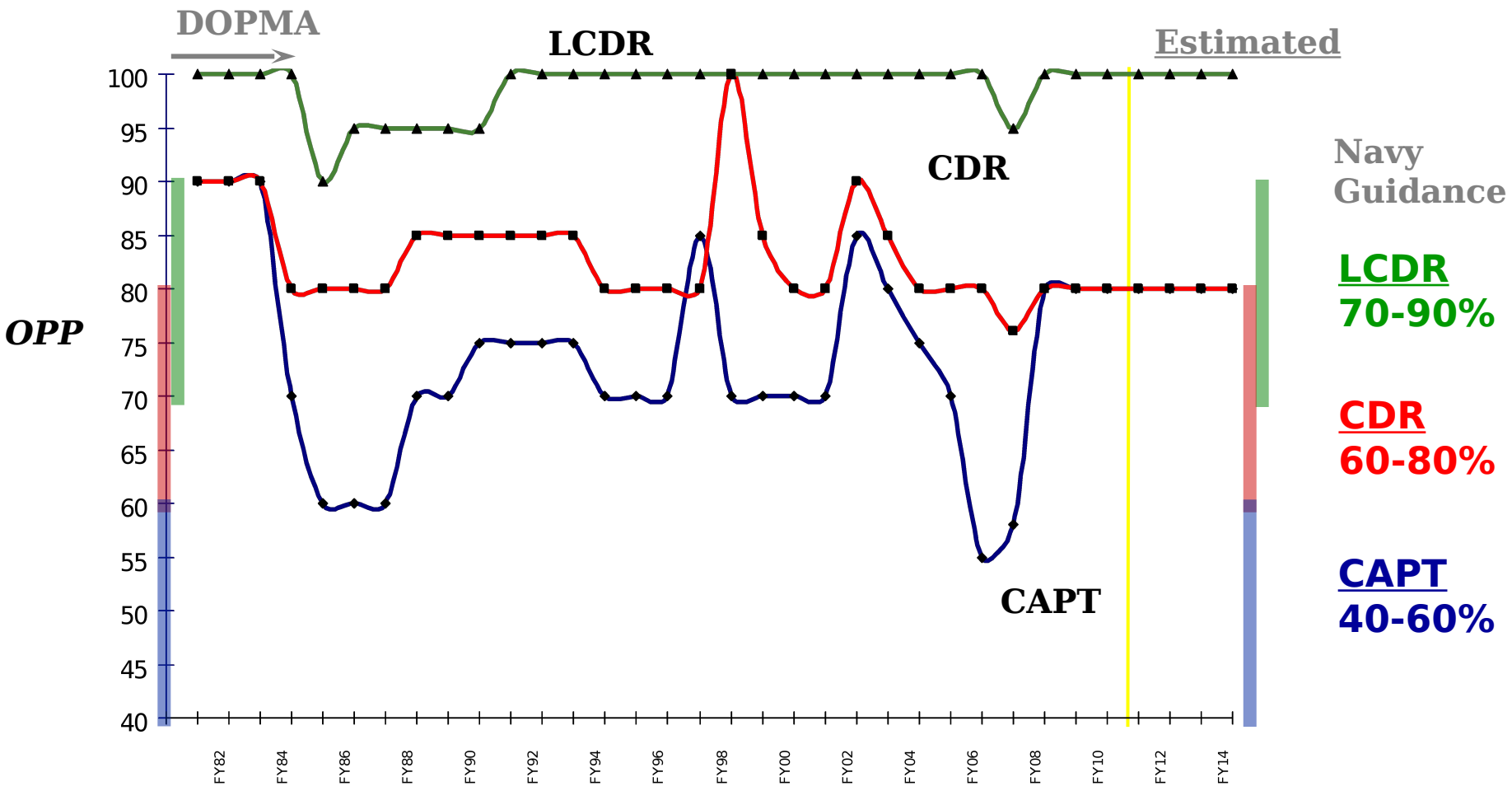
FY10 Promotion Plan

- **Promotions to Captain**
  - 79 in zone
  - 80% opportunity (20% over Navy Guidelines)
  - 63 anticipated selections

- **Promotions to Commander**
  - 182 in zone
  - 80% opportunity
  - 146 anticipated selections

- **Promotions to Lieutenant Commander**
  - 203 in zone
  - 100% opportunity (10% over Navy Guidelines)
  - 203 anticipated selections

C Historical Opportunity (FY81-FY14)



NAVY MEDICINE
World Class Care…Anytime, Anywhere

The Bottom Line

- 98% battlefield survival if alive when touched by Corpsman
- Highest quality medical services in support of nation building, hearts and minds

Despite AHLTA, divestitures, RVUs, mil-to civ conversions, GME challenges, HPSP shortfall—Navy medicine is delivering healthcare that has never been equaled in history of mankind, or mankind's wars

MEDICAL CORPS
UNITED STATES NAVY

Back-up

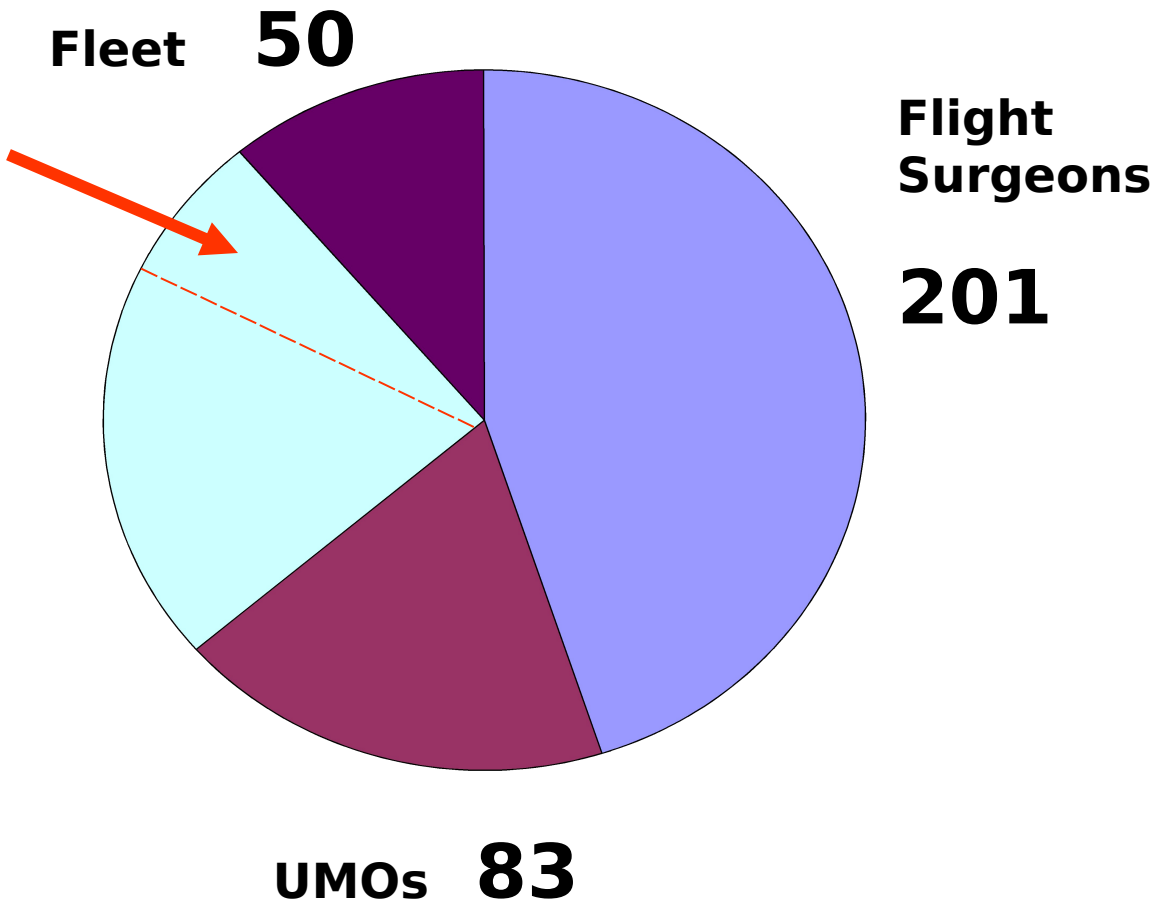
NAVY MEDICINE
World Class Care…Anytime, Anywhere

Other Hot Issues

- Recruiting to MC
- Special Pays
- Buy-backs of mil-to-civ
- Mentoring
- EMF Kuwait/Al Asad
- GME
- Promotion Plan

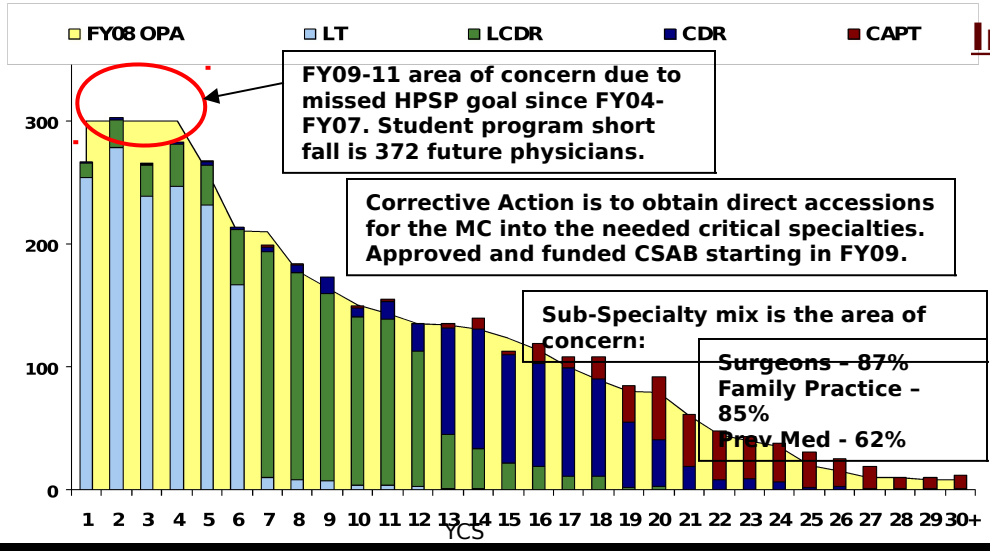
NAVY MEDICINE
World Class Care…Anytime, Anywhere

2007 GMO Billets
Total = 447

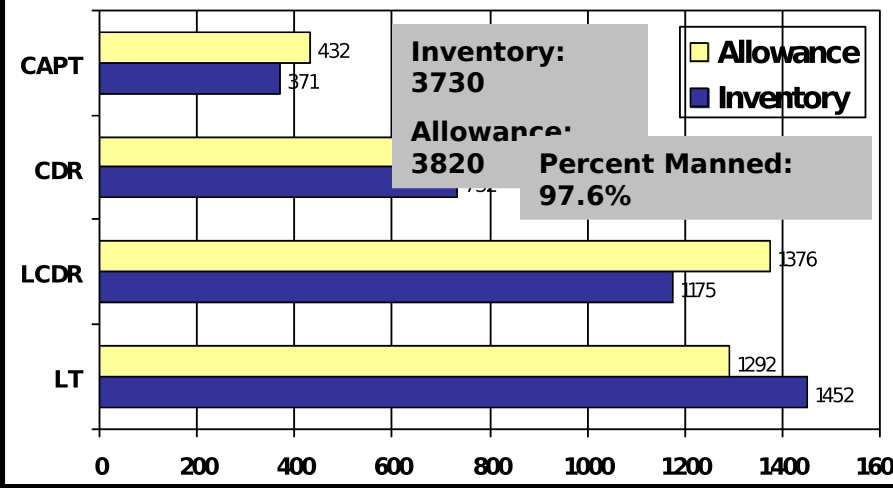


BSO-18
All PGY-1 billets converted 2007

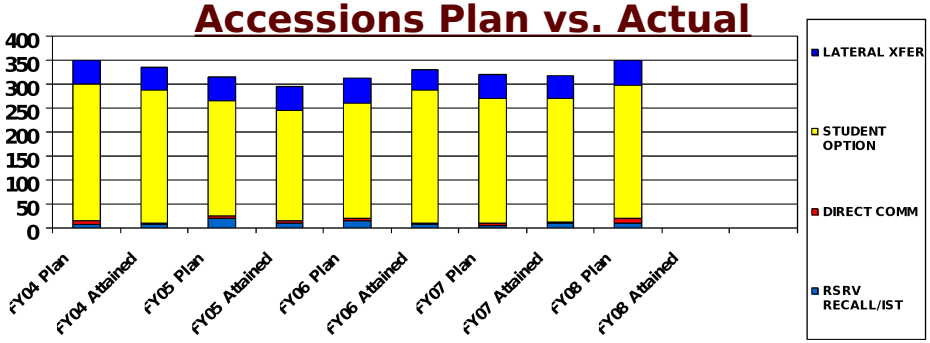
Medical Corps AC (2100)


FY08 OPA
LT
LCDR
CDR
CAPT
FY09-11 area of concern due to missed HPSP goal since FY04-FY07. Student program short fall is 372 future physicians.
Corrective Action is to obtain direct accessions for the MC into the needed critical specialties. Approved and funded CSAB starting in FY09.
Sub-Specialty mix is the area of concern:
Surgeons – 87%
Family Practice – 85%
Prev Med - 62%
YCS

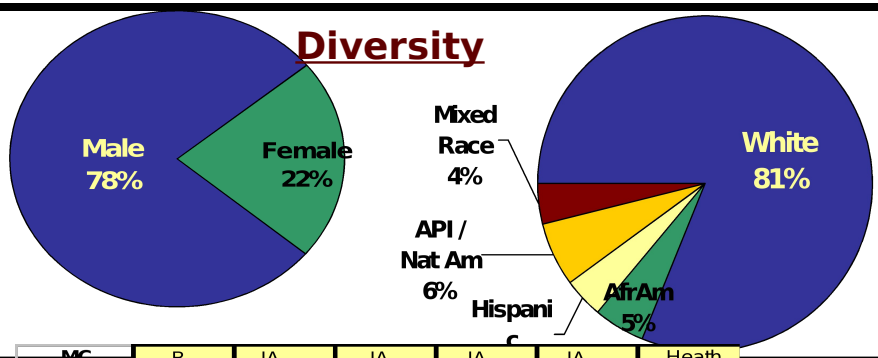
Inventory and OPA by Rank



Accessions Plan vs. Actual



Diversity



Retentio

n	YG98	YG99	YG00	YG01	YG02	YG03
YCS 5	409	411	402	395	367	335
Retention Goal	348	350	342	336	312	285
Retention Reqd	85.09%	85.16%	85.07%	85.06%	85.01%	85.07%
Retained	272	268	235	248	233	269
Retention Attained	66.50%	65.21%	58.46%	62.78%	63.49%	80.30%
Tolerances	78.16%	76.57%	68.71%	73.81%	74.68%	94.39%

Tolerances: >95% 90-94.9%: <90%

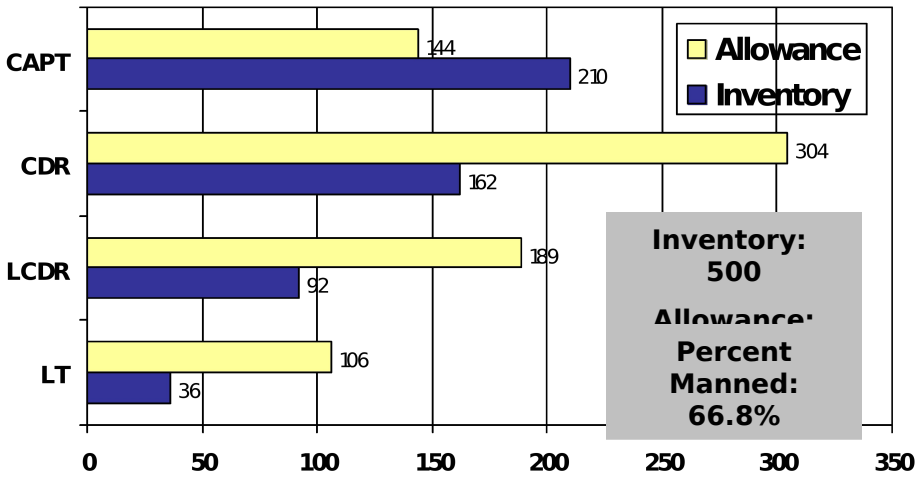
Mobilization IA Capacity

MC	B_av	IA_gross	IA_net	IA_dem	IA_ratio	Heath
CAPT	CAPT	326	55	41	1.3	
CDR	CDR	535	89	67	44	
LCDR	LCDR	1028	140	105	52	
LT	LT	859	124	93	21	
		0	2748	408	306	1.33

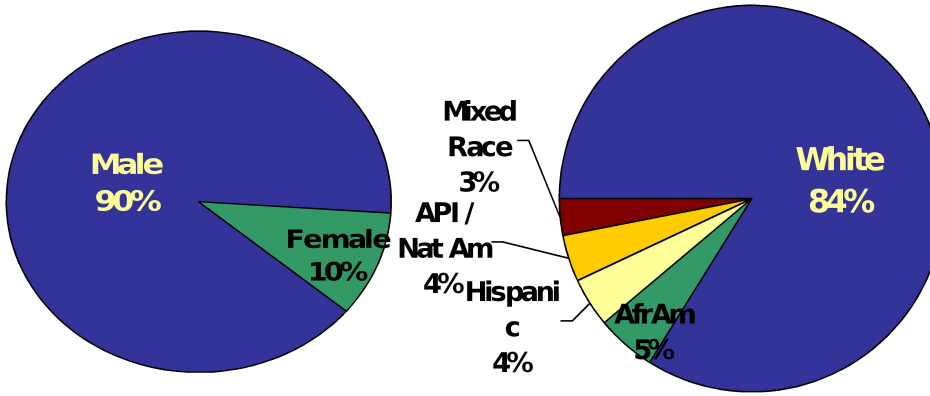
Stressed Specialties due to Mobilization:
General Surgery, Family Practice, Preventive Medicine, Psychiatry and Emergency Medicine

Medical Corps RC (2105)

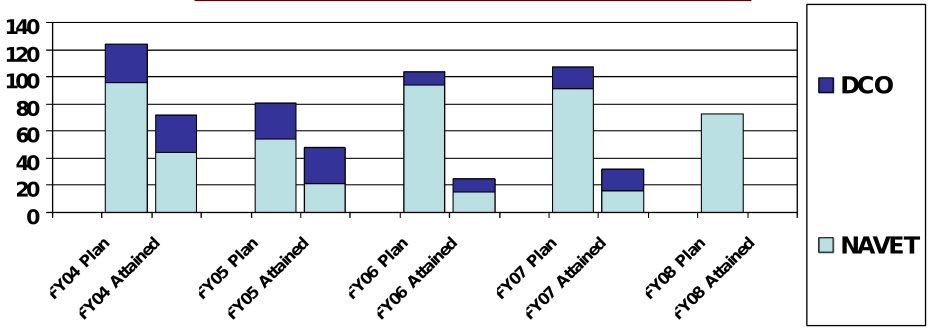
Inventory and OPA by Rank



Diversity



Accessions Plan vs. Actual



Mobilization / IA Capacity

	INV	RD2	RM1	R##	ONA	RDA	AVAIL	
CAPT	210	52	19	0	6	62	133	63%
CDR	161	41	14	0	4	32	102	63%
LCDR	92	15	9	0	1	7	67	73%
LT	36	0	0	0	0	0	36	100%
	499	108	42	0	11	101	338	68%

Tolerances:

>75%

50%-75:

<50%

INV – Inventory

RD2 – Previously mobilized

RM1 – Currently mobilized

R## - Identified for mobilization

ONA – Otherwise not available time

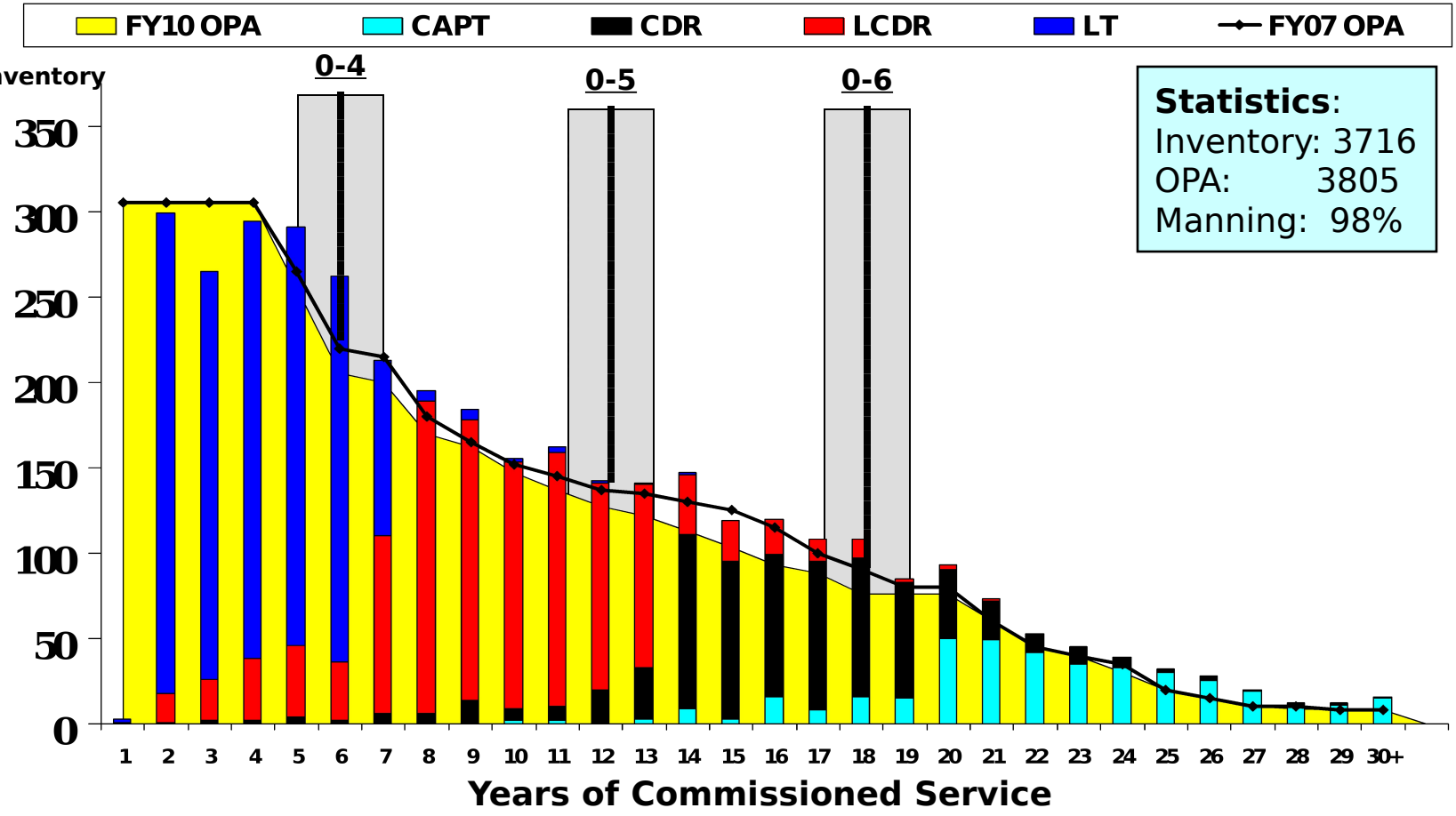
RDA – Previously mobilized, dwell completed

AVAIL – Available for mobilization

Medical Corps Community

Current Status

Accessions | Attrition | Retention | Resigs | Fit | OCM Notes



Source: OMF data as of end March 07; Reallocated OPA as of March